



**CITY OF AUSTIN**  
**Chauffeur's Permit Application**  
**New / Renewal / Amendment**

The undersigned hereby applies to the City of Austin for a Chauffeur's permit and in connection therewith furnishes the following information.

**1.** Applicant's Name \_\_\_\_\_ **2.** Social Security No. \_\_\_\_-\_\_\_\_-\_\_\_\_

**3.** Address \_\_\_\_\_ **4.** Date of Birth \_\_\_\_\_  
Street City State Zip

**5.** Telephone No. ( \_\_\_\_ ) \_\_\_\_\_ **6.** Texas Driver's License # \_\_\_\_\_ **7.** Exp. Date \_\_\_\_\_

**7a.** E-mail Address (optional) \_\_\_\_\_

**8.** Number of years of Texas residency \_\_\_\_\_ **9.** List any other states of residence during the 3 years preceding the date of this application: \_\_\_\_\_  
\_\_\_\_\_

**10.** Are you a citizen of the United States? Yes No **11.** If no, provide proof of employment eligibility.

**12.** Have you ever been convicted of a criminal homicide offense; fraud or theft; unauthorized use of a motor vehicle; prostitution or promotion of prostitution; sexual assault; sexual abuse or indecency; state or federal law regulating firearms; violence to a person; use, sale or possession of drugs; or driving while intoxicated? Yes No

**13.** If yes, provide details on the back of this page and you must provide proof that you have maintained a record of good conduct and steady employment since release, have supported dependents, if applicable, and have paid all outstanding court costs, supervision fees, fines and restitution that were ordered at the time of conviction.

**14.** Have you ever been convicted of any other criminal offense? Yes No **15.** If yes, provide details on the back of this page.

**16.** Are you presently under indictment for any crime? Yes No **17.** If yes, provide details on the back of this page.

**18.** Have you ever been convicted of a traffic violation? Yes No **19.** If yes, provide details on the back of this page. If you have one or more traffic convictions or violations during the three years preceding the date of this application, you must submit proof of completion of a Driver Safety Course as provided for in the Texas Transportation Code for a course completed not earlier than the 180<sup>th</sup> day preceding the date the application is submitted to the department.

**20.** Has your driver's license ever been suspended or revoked? Yes No **21.** If yes, provide details on the back of this page.

**22.** On the back of this page, describe your experience in general as a driver and as a driver of a ground transportation service vehicle.

**Response to #13 Criminal History:**

**Response to #15 Other Criminal Offenses:**

**Response to #17 Indictments:**

**Response to #19 Traffic Violations:**

**Response to #21 Driver's License Suspension/Revocation:**

**Response to #22 Driving Experience:**

**23.** You must provide a **complete** criminal history record issued and **certified** by the Texas Department of Public Safety. If you have been a **resident of Texas for less than three years**, you must provide a **complete** criminal history record from **each state of residence** for 3 years preceding the date of application. Each criminal history record must be **issued and certified** by the appropriate governmental entity not earlier than the 30<sup>th</sup> day before the date the application is submitted to the department.

**24.** You must provide a **complete** driving record issued and **certified** by the Texas Department of Public Safety. If you have been a **resident of Texas for less than 3 years**, you must provide a **complete** driving record from **each state of residence** for 3 years preceding the date of application. Each driving record must be **issued and certified** by the appropriate governmental entity not earlier than the 30<sup>th</sup> day before the date the application is submitted to the department.

**25.** Do you have a Chauffeur's permit to drive for any other ground transportation service in Austin? Yes  
No **26.** If yes, list the services.

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**27.** If you intend to continue to drive for any of these services, you must provide a written statement from each acknowledging that you have informed the service of your intent to drive for others and that the service agrees to continue to sponsor you as a driver for their service. The attached form is provided for this purpose.

**28. Under no circumstances may a driver refuse to transport a disabled passenger with or without a seeing-eye dog, wheelchair, or any other necessary apparatus.**

**29.** I, the undersigned applicant, do swear or affirm that all of the information included within this application is accurate, and I understand that any omitted information or information found to be inaccurate will result in the denial of this application for a chauffeur's permit or the revocation of authority to operate a ground transportation service vehicle that is granted based on the information provided in this application. I also swear or affirm that I have read and understand sections of Chapter 13-2 of the Austin City Code relating to drivers of ground transportation service vehicles and agree to comply with the terms as written and as may be amended. I hereby agree and authorize all City of Austin employees who have the need to review the information provided on both my criminal history and driving records as a part of their jobs with the City of Austin to review such information. In addition, the holder sponsoring of my application may review my criminal history and driving records.

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Signature of Applicant                      Date

In order to get to the section of the City Code that deals with ground transportation, Google Austin City Code. Click on Austin - American Legal Publishing Online Library. Chose Frames or No Frames. Click on Title 13 then 13-2 in the search box.

**30. THE STATE OF TEXAS  
COUNTY OF TRAVIS**

**BEFORE ME**, the undersigned authority, on this day appeared \_\_\_\_\_, known to me to be the person whose name is signed to the foregoing application and duly sworn by me states under oath that he has read the said application and that all of the facts therein set forth are true and correct.

Sworn to before me, this, the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

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Notary Public in and for Travis County, TX

31.

\_\_\_\_\_  
**Ground Transportation Service Name – Primary Sponsor**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**Telephone Number**

\_\_\_\_\_  
**E-mail Address (optional)**

I, the undersigned authorized representative for the above Ground Transportation Service, have reviewed this applicant's criminal history, driving record, and knowledge of the Austin City Code relating to ground transportation service. This applicant desires to operate a ground transportation service vehicle under the operating authority of this service. I find this applicant to be capable and qualified to operate a ground transportation service vehicle in Austin and agree to sponsor this applicant and recommend approval of this request for a City of Austin Chauffeur's permit.

- ☐ Application is completely filled out.
- ☐ **If applicant will be an independent contractor, please execute Exhibit "A" (page 5)**
- ☐ Complete and certified criminal history record attached.
- ☐ Complete and certified driving record attached.
- ☐ Defensive driving certificate attached if applicant has citation on record in last three years.
- ☐ Certified driving and criminal history records from other state(s) attached if applicant has not lived in Texas for three years.
- ☐ Applicant's knowledge of Austin has been reviewed.
- ☐ Applicant has been given an opportunity to review the Austin City Code.

Please check off each item above to verify that you have reviewed and attached all necessary records.

\_\_\_\_\_  
Company Representative Signature (Primary)    Date

\_\_\_\_\_  
Company Representative Signature (Secondary)    Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Company Representative Signature (Third)    Date

\_\_\_\_\_  
Company Representative Signature (Fourth)    Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

Exhibit "A"

This applicant will be an independent contractor. As such, I, the operating authority holder/franchise holder certify by signing below, that this applicant has executed a contract in compliance with City Code Section 13-2-74.

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Signature

Date

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Printed Name